



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
DIVISION OF REGULATORY BOARDS
LOCKSMITH LICENSING PROGRAM
500 JAMES ROBERTSON PARKWAY
NASHVILLE, TENNESSEE 37243-0570
615.532.3369 FAX: 615.532.2965
<http://regboards.tn.gov>

Change of Address Form

Please complete the following information (please type or print) and mail or fax to this office

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Locksmith Company (Company Address Change)

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Locksmith/Locksmith Apprentice (Home Address Change)

Company/Individual Name _____
Name of Company or Individual

License/Registration Number _____

Previous Address _____ Suite # _____

City _____ State _____ Zip Code _____

New Address _____ Suite # _____

City _____ State _____ Zip Code _____

Area Code & Phone Number _____

Area Code & Fax Number _____ Effective Date _____

Email Address: _____

Signature of Company Representative

Date Signed

Signature of Licensee or Employee Registrant

Date Signed